Human Citoplacell 2G, 350 mg anti-ageing capsules, is an oral complex which, when taken regularly, will reactivate hypophysis function, thus achieving improved production of HGH, also known as the “Youth Hormone,” thanks to the action of a select set of amino acids and catalyst peptides. The potent action of the components of Human Citoplacell G2 achieves a sustained therapeutic effect of anti-oxidant protection, improved cognitive faculties and increased energy and general well-being.

CLINICAL INFORMATION AND PHARMACOLOGY

Composition:
Each capsule contains 350 mg of an exclusive internationally patented formula which contains a mix of amino acids composed of: alanine, arginine, aspartic acid, phenylalanine, glutamic acid, glycine, histidine, lysine, methionine, serine, threonine, tryptophan, tyrosine, valine, standardised ginkgo biloba extract, tecoma curialis extract, coenzyme Q-10, Royal Jelly extract, freeze-dried soy protein, DHEA, KH3, riboflavin, prenenolone, and thiamine.

Mechanism of Action:
The synergistic action of the amino acids and catalysing peptides of Human Citoplacell 2G induces and stimulates the pituitary gland to release human growth hormone (the production of which diminishes considerably with age), which acts directly on all body tissues, provoking the activation of a more youthful metabolism, characterised by an increase in protein synthesis in almost every cell of the body, increased mobilisation of the fatty acids of the adipose tissues, increased quantity of free fatty acids in the bloodstream and preferential use of fatty acids, instead of glucose, as a source of energy.
PHARMACOKINETICS AND PHARMACODYNAMICS:

**Human Citoplacell 2G** is available in capsule form. These capsules are gel-coated so that they dissolve in the stomach, releasing the main active ingredients. These components pass into the intestines, where they are absorbed into the bloodstream by active transport.

As for amino acids, their exact proportion in the body depends on the type of proteins ingested, the pertinent synthesis at cell level and selective excretion by the kidneys. Once they have penetrated the cells (by facilitated or active transport), the amino acids combine with one another by intra-cellular fermentation action to form proteins. Each cell has a limit for storing proteins, and the excess amino acids in the bloodstream are eliminated in the form of new products at the level of the liver and are used to release energy or are stored in the form of fat. Those which are not used are eliminated by the kidneys.

Analysis:

**Human Citoplacell 2G** is the most effective anti-ageing clinical treatment in oral form available on the market. This product is known in many European countries as “youth capsules.” Its composition is a unique and exclusive anti-ageing formula, thanks to its stimulating action and its capacity to improve organ and cognitive functions. With the creation of the American Academy of Anti-Aging Medicine (A4M), the practice of hormone replacement is strengthened and extended, an important argument in the fight against pathological ageing.

Contraindications:

**Human Citoplacell 2G**, being an essentially natural product, does not produce any reaction at all, except in persons with a marked protein allergy tendency.

Side Effects:

There have been no reported cases of side effects; only slight drowsiness during the first 3 days of treatment.
INDICATIONS AND DOSING

- Organ Ageing
- Diminished Sex Drive
- Immune System Deficiency
- Physical Exhaustion
- Mental Exhaustion
- Cell Nutrition Deficiency

Take one capsule in the morning and another at bedtime (1 b.i.d.) with any liquid. Human Citoplasccell 2G can be taken indefinitely since it is totally safe and its components do not create deposits. Starting at age 46, it is recommended to increase the dose to four (4) capsules daily: two (2) in the morning and two (2) in the evening (2 b.i.d.), preferably before meals.

CLINICAL STUDY:

Prove the therapeutic efficacy of complementary therapy with Human Ultracell 2G and Human Citoplasccell 2G (according to established dosage guidelines) in the treatment of chronic ageing-related poly-pathological symptoms, during 60 weeks of treatment.

Graph

Expected response translated into improvement of diffuse symptoms during complete treatment with H Citoplasccell 2G

More information:

CD Card Human Ultracell 2G
Human Citoplasccell 2G
REFERENCES

2nd and 3rd Cellular Generation Treatment Line of Products

- ANDROCELL 2G (Male Hormone Cycle Regulator and Activator)
- BIOENZYM 2G (Anti-Inflammatory Enzyme Therapy)
- BIOFEMIN 2G (Female Hormone Cycle Regulator and Activator)
- BIOLASTIN 2G (Circulatory Enzyme Therapy)
- CELLOGANE COMPLEX 2G and CELLOGANE MULTI COMPLEX 2G (Cellular Therapy)
- HUMAN ULTRACELL 2G (Anti-ageing Cell Regenerator)
- HUMAN CISOPLACELL 2G (ORAL Anti-ageing Complement)
- HUMAN ULTRACELL 3G (Anti-ageing Cell Repairer)
- MEKENZ H7 2G (MULTI-ENERGISER)
- REVERCELL 2G (Cellular Metabolic Restorer)
- RHEMACELL 2G (Osteoarticular Enzyme Therapy)
- THYMOENZYM 2G (Cellular Immunomodulator)
- ZYMOCELL 2G (Neurohormonal Enzyme Therapy)

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Global sponsor of the foremost anti-ageing medicine congresses and associations


Europe  France Germany Holland Italy Portugal Spain Switzerland
Americas  United States Mexico Brazil
Asia  Thailand China Singapore Malaysia
Middle  East Dubai

Natural pharmaceutical-quality bio-medications; work to optimize energy and cell nutrition, exerting an effective preventative and curative action which, in addition to treating symptoms, empowers the cell structure of tissues and organs, avoiding the appearance of the bridge that connects the symptoms to the disease and making the body fit to withstand functional stress loads, by correcting the biological process of the source of some diseases and their side effects.
Biocell Ultravital’s “Bioresarch Institute,” in its quest to increase the quality-of-life expectancy of human beings, has devoted decades to the research and development of bio-cellular compound-based treatments and products. These therapies, which have been controversial in the past, have been validated with greater acceptance thanks to their therapeutic efficacy, sparking the greatest interest in medical and scientific circles worldwide.

In Switzerland, 2004 was a landmark year, since it served to consolidate all the research related to the topic, when Anita Holler, a scientist who collaborates with the Swiss public health office, declared to The Scientist newspaper, “We are very satisfied that the law on embryonic stem cells was passed; it represents a positive acknowledgement for Switzerland as a scientific centre, a country with a broad scientific history in cell research for therapeutic purposes” and which responds in a timely fashion to the incredulity and reticent attitudes of the past, when a large part of the scientific community knows that it was here that cell research was born.

For the Biocell Ultravital bioresearch institute, this new law represents a kind of legitimisation of all our efforts over the past 70+ years and recognition by hundreds of thousands of other scientists the world over.

We point this out not with the egotistical idea of awarding ourselves more credentials, but we shall not hide our satisfaction over the good news that this represents for everyone. It is truly satisfying to share scientific clarity in our times. We are especially pleased by the current report of the World Health Organisation (W.H.O.) defining cell therapies as alternative medicine. With all due respect, there is no doubt that the research present in our scientific developments, set forth in our products, must already be focused upon not as just another alternative, whereas they comply faithfully with the therapeutic objective.

It pleases us to hear Dr. William Haseltine, between 2000 and 2004 when he was chairman in the U.S. of Human Genome Sciences, coin the phrase “We are in the era of regenerative medicine,” a term which for the past 40 years—of course, from afar—was the seal of our research for the development of clinical studies at that time.

It took many decades for scholars and followers of conventional synthetic drugs to accept their limited therapeutic effect, due to the dose-response ratio. Pharmacological therapy continues trying to correct diseases in terms of the evident symptoms alone, forgetting that the great majority of those pathologies carry prior and microscopic sequelae, which we at Biocell Ultravital call type 1, 2 and 3 cell disorders. For reference purposes only, we point out the scientific focus that 2 time Nobel Prize winner Dr. Linus Pauling...
had on the subject when he spoke of molecular diseases, inferring that almost all tissue diseases appear due to the consequence of structural cell damage. An analysis questioned in the past, which today gains greater validity and which leads this eminent scientist to express his ideas in easy-to-understand language and terms in his very successful book titled How to Live Longer and Feel Better. Coincidence or not, this title matches our scientific description to qualify the therapeutic action of our products as “Cellular Treatments to Live Longer and Feel Better,” a reasoning on our part since 1977, which we are happy to share now.

Biocell Ultravital celebrates in good time the positive changes taking place in the different health sectors, especially in preventative medicine and the high degree of acceptance of new unconventional treatments throughout the world, especially in North America. Finally, we are proud to include here the legacy of Dr. Escardo by reviving his scientific motto; “There is always only one medicine and it is the one that cures.”

This important historical review serves as a calling card to inform the international medical community of the incorporation in our product formulas of new biological active ingredients that are precursors of stem cells from embryonic extracts, in order to promote its therapeutic effect and which now forms part of the new range of 2nd and 3rd generation treatments to revitalise, regenerate and repair cell function, consolidating the new era of preventative and anti-ageing medicine. Perhaps new generations of scientists are still to be born who will discover the immortality gene. The present is very promising, because the energy of this marvellous gift which is life can already be fittingly preserved and prolonged in time for the benefit of mankind. That is our mission.

Lucerne, Switzerland
Some seek the formula of eternal youth, and molecular biology and genetic engineering laboratories worldwide are full of scientists in search of the key to deciphering human cell behaviour. But after discovering embryonic stem cells, as well as adult and induced pluripotent ones, scientists are now navigating in a sea of doubts. This promising scientific area is driving us to research the possibilities of applying human-origin cell therapies to treat diseases.

For the scientists who comprise Biocell Ultravital’s molecular stem cell research division, we are also continuously exchanging knowledge and expanding our field of research with the immense support that is represented by the experience gathered during these last decades through the bioresearch institute. For them, the mission is difficult and it is a challenge to continue making advances in clinical developments in embryonic stem and adult cells as regards their advantages and disadvantages with respect to their use and therapeutic potential.

We are not clear as to which is the safest method for a future application of stem cells. What are the pros and cons of embryonic and induced pluripotent stem cells? We do not know very well how to go from one differentiated cell to another in a way that is 100% safe. These are questions that are also shared by the scientists who belong to the Internacional Society for Stem Cell Research. The potential advantage of using adult stem cells is that the patient’s own cells could be expanded in cultures and later reinserted in the patient. The use of the patient’s own stem cells would mean that the cells would not be rejected by the immune system. This represents an advantage, whereas immunological rejection is a serious complication. Among the disadvantages, it has been pointed out that the majority of these cells have a limited auto-renewal, in addition to being very cumbersome and expensive to handle, with no guarantee of at least achieving a general revitalisation for the recipient organ, but the most dangerous disadvantage is that the risk exists of possibly developing tumours, as confirmed by testing in animals. The hopes deposited in the therapeutic possibilities of stem cells have two very clear paths—to repair damaged tissues and solve genetic diseases, as indicated by Thomas Graf, coordinator of the Differentiation and Cancer program of the Center for Genomic Regulation (CRG).
"Progress is slow," acknowledges Graf. "Each type of cell that we want to generate has its problem and all the scientists in the world are studying and developing formulas, although all are pursuing the same thing, from the U.S. to China, by way of France, Germany, Switzerland, Singapore, Japan and others."

If researchers lack a set course, what certainties can be given to patients? The inordinate publicity surrounding the advances in stem cell research has swayed the expectations of many patients and this lack of knowledge has given rise to the so-called stem cell tourism.

There are clinics operating in China, Russia, some European countries, as well as in the U.S. and Latin America, with little regulation, and which promise miracle treatments thanks to the use of stem cells, not scientifically proven, to cure certain genetic pathologies. This is uncontrollable, in addition to being irresponsible, and shows a lack of ethics, according to Yann Barrandon, director of the Dynamics of Stem Cells laboratory of Lausanne, Switzerland. To the traffic of persons in search of a non-existent cure, another question is added: If the treatment does not work and harms the patient, who assumes responsibility for the matter?

Making the full potential of cell therapy based on stem cells of human origin a reality still requires intense experimentation to be able to determine its risks and how to avoid them.

Simply learning how to cultivate stem cells and make them reproduce in the laboratory took twenty years of work. Many more years will be needed for this research area to advance as quickly as possible. The price of not doing so is paid daily in the diminished quality and duration of life of thousands of persons and all these scientific developments and research continue to be at the centre of bioethical, religious and political debates.

For now, the therapeutic arsenal of animal and plant origin remains at a high range that is almost indispensable for the pharmaceutical industry that produces and registers each year 100,000 new formulas derived in the fabrication of sundry medications for the cure and control of diseases in humans, such as insulin, adrenaline, corticoid, oestrogen-oestradiol, Vitamin B12. Amino acids are just some on the interminable list, in addition to the use of organs and glands of animal origin animal for transplantation in humans, through what is known as xenotransplantation.

At Biocell Ultravital, we are only one step away from broadening our therapeutic focus in every dimension. The future is tomorrow and the path of medicine should be to prevent without thinking of diagnosing; to regenerate without thinking of curing.
At present, Biotechnology is quickly changing, from an industry of research and development, to an industry of manufacturing, sales and marketing. Five increasingly developing fields can be mentioned: stem cell use, production of DNA chips and proteins, clinical nanotechnology, tissue engineering and proteomic development.

Biocell Ultravital's bioresearch institute, with more than 70 years devoted to the research and development of specific high-power biomaterial vital for the human body, continues to develop new therapies in which we have succeeded in having the dysfunctional cells of the recipient regenerate for their repair and revitalisation within the strictest and most rigorous controls exacted by bio-safety.

For the most part, we employ natural substances—so-called cell compounds—using extracts of animal and plant origin that are 100% safe true bio-medications for cell nutrition that progressively induce the repair and normalisation of the cell cycle as a curing mechanism. When what is used is the injection of whole cells, we are speaking of cell renewal. The success of our cell treatments lies mainly in the fact that they are accepted by the recipient body without risk of rejection or possible disorders in the cell genetics of the recipient; its effects are revitalising in a first phase and regenerative subsequently. Of course, they do not produce the therapeutic effect response known by all; rather, to the contrary, it is the body that modifies itself. Unlike chemical drugs, that can alter the rhythm of the existing biological processes (e.g., chemotherapy), our products lack the capacity to impose themselves on the target organ; rather, they only act to the extent that they are accepted and incorporated as integral, wherefore they can never act by injuring the recipient body. The subsequent reactions over time (for example, the sustained increase in production of a hormone) are not due to the residual action, but to the biological response on the part of the recipient. The very complex but at the same time simple composition of our products, although it may sound contradictory, is the farthest thing from the simplicity of the mono-drug, which pharmacology seeks as an efficacious substance.

Whereas it focuses generally on symptomatology, classic therapeutic is geared towards the final links of the disease; that is, it is more symptomatic than causal, and is aimed pathogenetically and therapeutically towards the consequences and not towards whether the fault is due to the level of the mitochondria, ribosomes or cytomembranes, misdirected or misprogrammed genetically, in simple words, to cell disorders.

In natural fashion, the body's tissues throughout one's lifetime suffer wear, from which they defend themselves by developing the intrinsic capacity to self-renew those tissues that become worn. Should this type of self-renewal not exist, the life expectancy of living being would be considerably reduced. All living beings are made up by cells and all the body's cells have exactly the same genetic information. However, not all of them behave the same. We know
that regulation of growth and cell division (cell cycle) is very complex. In the cell cycle there are points of restriction that impede the normal continuation of the cycle for various reasons, such as, for example, if the cells have not attained sufficient size, lack nutrients, the DNA is damaged or receives outside chemical damage, etc.

Normal development is a balanced process which includes cell proliferation and death. The processes of cell proliferation and death by apoptosis are even more complex and involve the participation of many genes. In both processes, suppressor gene p53 is one of the most important and studied genes or protein. This transcription factor activates a variety of genes, resulting in the inhibition of the progression of the cell cycle and cell repair, or in apoptosis. The signals that activate p53 function include damage to the DNA that takes part in the inhibition of cell cycle progression during phase G1.

When a cell is damaged, the cycle's being detained or apoptosis's being induced depends on the intensity of the damage. The final result of the different mechanisms of action of p53 is to maintain the genomic stability of the cells. Therefore, the deficiency of this protein contributes to genomic instability, to the accumulation of mutations and the acceleration of tumorigenesis; p53 is mutated in 50-55 percent of all types of cancer in humans. These mutations are localised mainly in the domain of union to DNA, which results in the loss of its biological activity.

As you may note, the previous example is just one case that refers to cell disorders that lead to often incurable diseases, but there are many factors that can unleash disorders in normal and sound cell development. However, what is proven is that these are due to one or more deficiencies in elemental cell function and/or deterioration in its own environment.

On the other hand, the broad roster of diseases that affect the human body are based on cell degeneration and the consequent death of the different tissues that make up our bodies, whether acutely (infarctions) or chronically (degeneration- ageing).

It is for this reason that we have included in our tissues embryonic cell precursor tissues which correspond to the formulas of 2nd generation cell and precursor tissue products with a rich content of pluripotent cells, as is the unique case of the HUMAN ULTRACELL 3 G product. In this way, we succeeded in making available to the human body new cell materials which will give a new dynamic to previous formulas of our already recognised products and we are especially giving it a new therapeutic potential with the sufficient difference of ensuring optimum cell function which distances the body for as long as possible from the cell damage which will inevitably become pathologies and diseases with a greater influence on all ageing processes.

The use of these new components in our formulas conditions major achievements for regenerative and anti-ageing medicine through our products.